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Weekly Bulletin



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EDITOR

LIFE EXPECTANCY: WHAT IS BEING DONE TO PROLONG HUMAN LIFE.

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People are now living longer, on the average, than at any time in known and accurate history. Studies of vital statistics clearly show that at birth one may expect to live longer than in past generations. Life expectancy indicates the average age an individual may expect to live at any given period in his existence. The expectancy at birth is usually indicated when we speak of life expectancy, and this varies in different parts of the world. Australia, in 1921, had an average life expectancy of sixty years; citizens of our country could expect to live for fifty-eight years (in 1901 it was 49.2 years); while in India, the average duration of life was only twenty-four years. Life expectancy in many countries is rising rapidly, and we may expect further improvement in all civilized parts of the world.

Before outlining some of the reasons for the prolongation of human life, it is important to know some of the causes of death in the past. Tuberculosis, cancer, acute infections—especially diphtheria, scarlet fever, pneumonia, yellow fever, typhoid fever, and others—made up a large percentage of the deaths. Diseases of infancy, especially nutritional diseases, and diseases of the heart, blood vessels and kidneys accounted for many deaths at the extremes of life. Epidemics of

cholera, plague, influenza have throughout the ages taken a heavy toll. Such infectious diseases as syphilis, measles and smallpox have had a high mortality rate in virgin soil, and especially where, as in the case of smallpox, successful vaccination had not been practiced.

In the past quarter of a century we have seen great improvement in living conditions. Improved methods of sanitation and prophylactic methods have almost eradicated some of the infectious disease problems. Typhoid fever, once the scourge of our civilian population and army, has been brought under control. This disease, which caused more deaths in the Spanish-American war than were caused by shell fire, was a negligible cause of illness and death during the recent war, in spite of the great numbers engaged. Smallpox, which formerly occurred in epidemic form, killing and disfiguring thousands, has become an infrequent disease through successful and repeated vaccination. It is only when, as at the present time, large numbers of the people lose their fear of the serious types of the infection and fail to keep up vaccination, that we are in danger of serious epidemics. Diphtheria, the "membranous croup" of other days, is being brought under control by early recognition and treatment of cases, and the disease is being prevented by protection with toxin-antitoxin injections. Scarlet fever,

which has for a long time been a frequent cause of death and disability, is now to be classed as one of the curable diseases, and its prevention may be hoped for by the newer methods. Tuberculosis, one of our greatest menaces to life, has shown signs of falling off in the death rate for seventy years. Part of this improvement may be due to the development of a racial immunity, but no doubt most of the improvement is due to better methods in its early recognition and treatment, and our knowledge of its spread. The removal of tuberculous infected cattle from dairy herds and the rigid government inspection of meats have no doubt been of great value in reducing the tuberculosis in the community. We can expect further reduction of the death rate here, and tuberculosis will probably never again lead among the causes of death. Pneumonia has always been a common cause of death and, although serum has been developed for its treatment and inoculation for its prevention has been successfully practiced, it remains one of the chief causes of death. Yellow fever and malaria have been brought under control by improved sanitation and the control of the mosquito. Quinine has been of great value in treatment. Plague and cholera have been kept under control in all civilized countries, except for sporadic outbreaks. Parasitic diseases, such as hookworm and worm infections in meats for human consumption, have been reduced to a minimum through organized methods of prevention and cure. The hookworm areas of the world are known and campaigns are going on all the time to cure the sick and prevent further infection. Government meat inspection has prevented much disability from parasitic infections. The whole question of childhood and infant mortality has been the subject of special study by social and health agencies. It has been shown that a large number of deaths at childbirth and soon afterward could be prevented. Diseases of nutrition were common in the congested eastern cities. Such debilitated infants were subject to infections of many kinds. By concentrating on many of these problems, the greatest gain has been observed in the prolongation of human life. By saving a life at infancy the general average for the group is greatly increased.

One might enumerate other examples to show where the gains have come. One who reads the current papers and journals will note the comments on the increase of cancer and diseases of the heart and blood vessels. This increase is

largely due to the fact that more persons are living to the age when these conditions tend to occur. Cancer and diseases of the heart and blood vessels now head the list of the causes of death. We shall not be able to attack them rationally until the causes are better known. Rheumatic heart disease is a frequent cause of disability and death, and in this group much may be done in the near future. Cancer of certain types can be cured if recognized early before the tissues are invaded. Diseases of the blood vessels and heart in persons past fifty years probably begin much earlier in life, and the problem is to prevent before there are unmistakable signs of their presence. This problem has to do with the causes of old age itself. A certain group of diseases of the heart and aorta is due to syphilis, which may be controlled by appropriate early treatment of the acute infection, but preferably by preventing the original infection. Such problems take us into sociological and legal fields which are outside the scope of this paper.

The more one studies the subject of disease, the more he is convinced that few persons live to die of a "ripe old age." Most are prematurely cut down by infection, diseases of metabolism, injuries, accidents or self-inflicted wounds. Most of the deaths may be prevented if we know the causes. This pertains to the infections as a group, most of the metabolic diseases and is probably true of the arterial and heart disease group, and may also be true of cancer. Accidental deaths are being greatly reduced in the industries, but the rate from automobile accidents is increasing. These are in most cases preventable.

Statisticians believe that we may expect to increase the average expectation of life by twenty years during the next fifty years. This, I believe, is too high. We have done much for the infants and children, and the infectious disease group. The group of diseases occurring at, or past, middle life is not so easy to conquer, but we are safe in predicting that they will be better understood and controlled as time goes on.

Every effort should be made to improve the physique and health of our people, which were found to be so defective during the late war. "The impairment of the physique of the human body is the impairment of the intellectual and moral fiber, and the body is the tabernacle of the spirit of man."—Sir George Newman.—*Reprinted from Alameda County Public Health News.*

Florida Does Not Quarantine Smallpox.

The Florida State Board of Health gave out, January 8, a resolution concerning smallpox, which was adopted by the board in 1921, and still is in effect. It reads as follows:

"Whereas, The majority of smallpox cases occurring in the state are not seen or diagnosed by a physician, and

Whereas, The quarantine or isolation of the relatively few known cases of the disease gives the public a false sense of security, now therefore, be it

Resolved, That the State Board of Health of Florida hold every individual or citizen responsible for the prevention of smallpox in himself or immediate family and that the public be advised that such prevention can be obtained on application to the state board of health for smallpox vaccine. Be it further

Resolved, That the State Board of Health of Florida furnish free vaccine to any citizen of the state and wherever an epidemic of smallpox is threatened it make every effort to detail a district health officer to the infected community to give free vaccine to the public. Be it further

Resolved, That the State Board of Health of Florida will not quarantine smallpox nor will it be responsible for the treatment, maintenance or sustenance of any case of smallpox occurring within the limits of the state."



"Happiness is born of sentiment. Reason is cold and sometimes cruel, but sentiment is always gentle. Sentiment may be foolish and extravagant, but—it believes in making others happy."—Edgar A. Guest.



Starts Work On Malaria Survey.

Dr. Paul S. Carley of the International Health Board has arrived in California for the purpose of making a survey of malaria within the state. Mosquito abatement has been carried on quite consistently in California during the past few years. The measures employed have been both temporary and permanent, according to the availability of local funds. It is now proposed to determine how effective abatement measures may have been in reducing the prevalence of malaria and to ascertain the exact locations within the state where concentrated efforts should be directed toward more effective control of this disease which is so destructive to agricultural interests.

Healthy Students Make Healthy Teachers.

There is no argument against the necessity for school teachers to keep in good health. Dr. Ruby L. Cunningham, head physician for women at the University of California, has made an interesting statement regarding the health of women students and its relationship to the provision of healthy teachers for California schools. Of the health of college women, she says: "The college woman gains in general health and weight."

Dr. Cunningham flouts the idea, now somewhat current, that the college woman experiences nervous breakdowns or other ills as a result of her strenuous pursuit of a degree.

Basing her opinion on an examination made of fifth-year women students who are candidates for teachers' certificates, the physician indicated that by far the largest number reported no serious illnesses during their four years of study, and further claimed to feel better physically than at the time of their entrance to college. In the examination this spring, 218 prospective teachers filled out questionnaires and were given the examination.

The greatest factor in this improvement in health, Dr. Cunningham believes, is the regularity of living. The students eat meals at regular hours, get sufficient sleep and maintain a fair balance of work and play that is conducive to better physical health, she says.

"By examining these students during the time they are engaged in their practice teaching, we are aiding the school children and communities by assuring them of healthy teachers. Of course, all teachers granted the certificate at the end of five years are examined," says Dr. Cunningham in speaking of the purpose of the examination. "Another good feature of the plan is the advice on corrective measures given to candidates who need it. This will result in their better health at the time they undertake positions."



Plans Making For Pre-school Health.

The Bureau of Child Hygiene of the California State Board of Health is undertaking the preparation of plans for a state-wide campaign to discover physical defects in children who are of pre-school age. Every effort will be made to have children who will enter school next fall placed in fit physical condition before entering this new and important phase of child life.

MORBIDITY.***Diphtheria.**

91 cases of diphtheria have been reported, as follows: Oakland 9, Pittsburg 1, Fresno 1, Kern County 3, Los Angeles County 7, Glendale 1, Los Angeles 34, Torrance 1, Hawthorne 5, Gustine 1, Orange County 1, Orange 1, Santa Ana 2, Riverside County 1, Sacramento 1, San Bernardino County 2, Chula Vista 2, San Francisco 9, Manteca 4, Stockton 1, Santa Clara County 2, Santa Cruz County 1, Ventura 1.

Scarlet Fever.

160 cases of scarlet fever have been reported, as follows: Alameda 1, Berkeley 4, Livermore 1, Oakland 6, Chico 1, Fresno County 1, Fresno 4, Imperial County 6, Bakersfield 1, Lassen County 2, Los Angeles County 17, Alhambra 3, Burbank 1, Compton 2, Culver City 1, El Monte 1, Glendale 2, Huntington Park 1, La Verne 1, Los Angeles 39, Monrovia 2, Pomona 3, Redondo Beach 4, Whittier 1, Orange County 3, Fullerton 1, Huntington Beach 3, Orange 1, Santa Ana 2, Riverside County 2, Sacramento 4, San Bernardino County 2, Chula Vista 2, San Diego 7, San Francisco 11, Manteca 1, Stockton 2, Santa Clara County 9, San Jose 5.

Measles.

85 cases of measles have been reported, as follows: Berkeley 1, Oakland 1, Pittsburg 8, Los Angeles County 8, Claremont 3, Los Angeles 8, Redondo Beach 1, Sacramento 1, Hollister 1, San Bernardino 3, San Francisco 35, Lodi 1, Santa Barbara 2, Fillmore 4, Santa Paula 8.

Smallpox.

200 cases of smallpox have been reported,

*From reports received on February 15th and 16th, for week ending February 13th.

as follows: Berkeley 1, Oakland 21, Colusa County 3, Contra Costa County 1, Richmond 5, Los Angeles County 17, Claremont 1, Culver City 1, Glendale 3, Los Angeles 122, Montebello 1, San Gabriel 1, Vernon 1, Hawthorne 1, Madera 2, Sacramento County 5, Sacramento 6, San Bernardino County 1, San Bernardino 1, San Diego 1, San Francisco 1, Los Gatos 1, Santa Cruz 1, Oakdale 1, Santa Paula 1.

Typhoid Fever.

12 cases of typhoid fever have been reported, as follows: Imperial County 1, Los Angeles County 3, Los Angeles 3, Orange County 2, Riverside 1, San Francisco 1, San Joaquin County 1.

Whooping Cough.

57 cases of whooping cough have been reported, as follows: Alameda County 5, Berkeley 1, Oakland 4, Walnut Creek 4, Los Angeles County 4, Claremont 3, Los Angeles 9, Santa Monica 1, Monterey County 5, Riverside 2, San Diego County 1, La Mesa 1, San Diego 9, Santa Barbara 6, Santa Paula 1, San Francisco 1.

Poliomyelitis.

4 cases of poliomyelitis have been reported, as follows: Oakland 1, Fresno County 1, Sonoma County 1, Los Angeles 1.

Epidemic Meningitis.

12 cases of epidemic meningitis have been reported, as follows: Fresno County 1, Los Angeles County 1, Santa Barbara 2, Sacramento 2, San Jose 1, Siskiyou County 1, Los Angeles 4.

Epidemic Encephalitis.

Los Angeles County has reported one case of epidemic encephalitis.

COMMUNICABLE DISEASE REPORTS.

Disease	1926				1925			
	Week ending			Reports for week ending Feb. 13 received by Feb. 16	Week ending			Reports for week ending Feb. 14 received by Feb. 17
	Jan. 23	Jan. 30	Feb. 6		Jan. 24	Jan. 31	Feb. 7	
Anthrax.....	0	0	0	0	0	0	0	0
Botulism.....	0	0	0	0	0	0	0	0
Chickenpox.....	292	305	358	420	283	398	467	350
Diphtheria.....	123	128	127	91	175	172	156	130
Dysentery (Bacillary).....	0	0	0	0	0	0	1	0
Epidemic Encephalitis.....	0	1	3	1	2	0	4	1
Epidemic Meningitis.....	8	12	9	12	1	4	2	1
Gonococcus infection.....	112	66	140	78	163	105	87	130
Influenza.....	1178	897	574	479	56	76	80	77
Leprosy.....	0	1	0	0	0	0	1	0
Malaria.....	0	0	1	1	0	1	3	1
Measles.....	67	62	66	85	48	49	39	28
Mumps.....	285	212	218	268	160	185	191	160
Pneumonia (lobar).....	102	97	99	129	94	98	92	145
Poliomyelitis.....	1	4	3	4	4	6	2	5
Scarlet Fever.....	188	210	171	160	180	168	170	137
Smallpox.....	102	87	186	200	194	182	173	137
Syphilis.....	100	120	174	95	153	108	138	116
Tuberculosis.....	197	121	214	157	171	172	130	214
Typhoid Fever.....	11	7	13	12	12	9	10	5
Whooping Cough.....	55	61	53	57	181	155	119	181
Totals.....	2821	2391	2409	2249	1877	1888	1865	1818

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